



C A L I F O R N I A D E P A R T M E N T O F
Mental Health

Division of Program Compliance – Audits Branch
1600 9th Street, Sacramento, CA 95814
(916) 445-1554, FAX (916) 445-1588

January 21, 2009

Vic Singh, Mental Health Director
San Joaquin County Behavioral Health Services
1212 North California Street
Stockton, CA 95202

Dear Mr. Singh:

AUDIT REPORT – SAN JOAQUIN COUNTY MENTAL HEALTH

We have examined the Short-Doyle/Medi-Cal Cost Reporting and Data Collection (CR/DC) report of San Joaquin County Mental Health for the fiscal period July 1, 2003 to June 30, 2004. Our examination was made in accordance with Section 14170 of the Welfare and Institutions Code and included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

In our opinion, the amount shown in the accompanying Summary of Net Federal Share of Federal Short-Doyle/Medi-Cal Program Costs and State General Fund under EPSDT program (Schedule 1) represents the actual net program costs allowable under the above mentioned statutes.

The effect of this revised allowable program costs is as follows:

NET PROGRAM COSTS

	<u>Settled</u>	<u>Allowed</u>	<u>Adjustment</u>
Federal Share of Short-Doyle/Medi-Cal	\$ 10,714,839	\$ 10,935,880	\$ 221,041
Federal Share of Healthy Families/Medi-Cal	\$ 81,842	\$ 74,468	\$ (7,374)
State General Funds EPSDT Due State	\$ 2,504,902	\$ 2,600,790	\$ 95,888

If you disagree with any of the results of this audit, you may request an informal appeal conference.

Vic Singh, Mental Health Director
January 21, 2009
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This request must be in writing and received by the Department of Health Care Services within sixty (60) calendar days following the date of receipt of this report. Your notice of disagreement should be directed to John Melton, Acting Chief, Administrative Appeals, Office of Legal Services, Department of Health Care Services, 1029 J Street, Suite 200, Sacramento, California 95814, and be in conformance with provisions of Sections 51016 and sequence, Title 22, of the California Code of Regulations.

Sincerely,

Chad Okemiri

for WALTER J. HILL, JR., MBA, EA
Chief of Audits

Chad Okemiri

CHUKWUEMEKA OKEMIRI, CPA
Supervisor, Northern Region Audits

Enclosures

Certified Mail

SCHEDULE 1

SAN JOAQUIN COUNTY
COMMUNITY MENTAL HEALTH SERVICES
SUMMARY OF NET REIMBURSABLE MEDI-CAL PROGRAM COSTS
FISCAL YEAR ENDED JUNE 30, 2004

		<u>As Settled</u>	<u>Audit Adjustments</u>	<u>As Audited</u>
<u>NET REIMBURSABLE MEDI-CAL</u>				
<u>PROGRAM COSTS</u>				
<u>COUNTY PROVIDERS</u>				
MEDI-CAL - FFP	(Sch. 2a)	\$ 7,294,386	\$ 151,602	\$ 7,445,988
HEALTHY FAMILIES - FFP	(Sch. 2a)	20,815	9,636	30,451
TOTAL FFP - COUNTY PROVIDERS		<u>\$ 7,315,201</u>	<u>\$ 161,238</u>	<u>\$ 7,476,439</u>
<u>CONTRACT PROVIDERS</u>				
MEDI-CAL - FFP		\$ 3,420,453	\$ 69,439	\$ 3,489,892
HEALTHY FAMILIES - FFP		61,027	(17,010)	44,017
TOTAL FFP - CONTRACT PROVIDERS		<u>\$ 3,481,480</u>	<u>\$ 52,429</u>	<u>\$ 3,533,909</u>
<u>TOTAL FFP - COUNTY PLUS CONTRACT PROVIDERS</u>				
MEDI-CAL - FFP		\$ 10,714,839	\$ 221,041	\$ 10,935,880
HEALTHY FAMILIES - FFP		81,842	(7,374)	74,468
TOTAL FFP - COUNTY PLUS CONTRACT PROVIDERS		<u>\$ 10,796,681</u>	<u>\$ 213,667</u>	<u>\$ 11,010,348</u>
<u>SUMMARY OF STATE GENERAL FUNDS</u>				
EPSDT - SGF		<u>\$ 2,504,902</u>	<u>\$ 95,888</u>	<u>\$ 2,600,790</u>

Note: The As Settled amount includes a refund of \$29,153 to the State subsequent to the initial EPSDT settlement. (Refer to Adjustment 116)

SCHEDULE 2

**SAN JOAQUIN COUNTY
COMMUNITY MENTAL HEALTH SERVICES
SUMMARY OF MEDI-CAL PROGRAM COSTS BY MODE OF SERVICE
FISCAL YEAR ENDED JUNE 30, 2004**

COUNTY OPERATED FEDERAL

		<u>As Settled</u>	<u>Audit Adjustments</u>	<u>As Audited</u>
<u>Total Medi-Cal Gross Reimbursement</u>				
1. Inpatient SD/MC and Crossover	(MH 1968, Ln 11, 11A)	\$ 0	\$ 0	\$ 0
2. Outpatient SD/MC and Crossover	(MH 1968, Ln 11, 11A)	10,488,263	295,181	10,783,444
3. Enhanced SD/MC (Children) - I/P	(MH 1968, Ln 16, 16A)	0	0	0
4. Enhanced SD/MC (Children) - O/P	(MH 1968, Ln 16, 16A)	26,831	2,974	29,805
5. Enhanced SD/MC (Refugees) - I/P	(MH 1968, Ln 22)	0	0	0
6. Enhanced SD/MC (Refugees) - O/P	(MH 1968, Ln 22)	0	0	0
7. Healthy Families Gross Reimbursement-I/P	(MH 1968, Ln 27, 27A)	0	0	0
8. Healthy Families Gross Reimbursement-O/P	(MH 1968, Ln 27, 27A)	32,023	5,539	37,562
9. Total		<u>\$ 10,547,117</u>	<u>\$ 303,694</u>	<u>\$ 10,850,811</u>

Less: Patient & Other Payor Revenues

10. Inpatient SD/MC and Crossover	(MH 1968, Ln 28, 28A)	\$ 0	\$ 0	\$ 0
11. Outpatient SD/MC and Crossover	(MH 1968, Ln 28, 28A)	4,817	3,966	8,783
12. Enhanced SD/MC (Children)-I/P	(MH 1968, Ln 29)	0	0	0
13. Enhanced SD/MC (Children)-O/P	(MH 1968, Ln 29)	0	0	0
14. Enhanced SD/MC (Refugees) - I/P	(MH 1968, Ln 30)	0	0	0
15. Enhanced SD/MC (Refugees) - O/P	(MH 1968, Ln 30)	0	0	0
16. Healthy Families Patient Revenue-I/P	(MH 1968, Ln 31)	0	0	0
17. Healthy Families Patient Revenue-O/P	(MH 1968, Ln 31)	0	194	194
18. Total		<u>\$ 4,817</u>	<u>\$ 4,160</u>	<u>\$ 8,977</u>

Medi-Cal Net Reimbursement for Direct Services

19. Inpatient SD/MC (Incl Children Enhanced)	(Ln 1,3 - Ln 10,12)	\$ 0	\$ 0	\$ 0
20. Outpatient SD/MC (Incl Children Enhanced)	(Ln 2,4 - Ln 11,13)	10,510,277	294,189	10,804,466
21. Enhanced SD/MC (Refugees)-I/P	(Ln 5 - Ln 14)	0	0	0
22. Enhanced SD/MC (Refugees)-O/P	(Ln 6 - Ln 15)	0	0	0
23. Healthy Families-I/P	(Ln 7 - Ln 16)	0	0	0
24. Healthy Families-O/P	(Ln 8 - Ln 17)	32,023	5,345	37,368
25. Total		<u>\$ 10,542,300</u>	<u>\$ 299,534</u>	<u>\$ 10,841,834</u>

Medi-Cal MAA Reimbursement

26. Service Functions 01-09	(MH 1979, Ln 11, Col. A)	\$ 0	\$ 0	\$ 0
27. Service Functions 11-19, 31-39	(MH 1979, Ln 12, Col. A)	185,933	(5,108)	180,825
28. Service Functions 21-19	(MH 1979, Ln 13, Col. A)	74,401	(2,044)	72,357
29. Total		<u>\$ 260,334</u>	<u>\$ (7,152)</u>	<u>\$ 253,182</u>

**SAN JOAQUIN COUNTY
COMMUNITY MENTAL HEALTH SERVICES
SUMMARY OF MEDI-CAL PROGRAM COSTS BY MODE OF SERVICE
FISCAL YEAR ENDED JUNE 30, 2004**

COUNTY OPERATED FEDERAL

		Audit		
		As Settled	Adjustments	As Audited
Amount Negotiated Rates Exceed Cost				
30. Inpatient SD/MC (Incl Children Enhanc)	(MH 1968, Ln 38, 38A)	\$ 0	\$ 0	\$ 0
31. Outpatient SD/MC (Incl Children Enhanc)	(MH 1968, Ln 38, 38A)	0	0	0
32. Enhanced SD/MC (Refugees)-I/P	(MH1968, Ln 39)	0	0	0
33. Enhanced SD/MC (Refugees)-O/P	(MH1968, Ln 39)	0	0	0
34. Healthy Families-I/P	(MH 1968, Ln 40, 40A)	0	0	0
35. Healthy Families-O/P	(MH 1968, Ln 40, 40A)	0	0	0
36. Total		<u>\$ 0</u>	<u>\$ 0</u>	<u>\$ 0</u>

Medi-Cal Administrative Reimbursement

37. Administrative Reimbursement Limit	(MH 1979, Ln 4)	\$ 2,712,374	\$ 61,313	\$ 2,773,687
38. Medi-Cal Administration	(MH 1979, Ln 5)	\$ 5,446,300	\$ (1,333,940)	\$ 4,112,360
39. Medi-Cal Reimbursement	(Lower of Ln 37, Ln 38)	<u>\$ 2,712,374</u>	<u>\$ 61,313</u>	<u>\$ 2,773,687</u>

Healthy Families Administrative Reimbursement

40. Healthy Families Administrative Reimbursement Limit	(MH1979, Ln 8)	\$ 12,655	\$ (3,176)	\$ 9,479
41. Healthy Families Administration	(MH1979, Ln 9)	\$ 0	\$ 14,440	\$ 14,440
42. Healthy Families Administrative Reimbursement	(Lower of Ln 40, Ln 41)	<u>\$ 0</u>	<u>\$ 9,479</u>	<u>\$ 9,479</u>

Utilization Review Reimbursement

43. Skilled Professional	(MH1979, Ln 14, Col. D)	\$ 0	\$ 148,547	\$ 148,547
44. Other Medi-Cal U.R.	(MH1979, Ln 15, Col. D)	\$ 334,382	\$ (256,187)	\$ 78,195

Net SD/MC Reimbursement - FFP

45. Direct Services	(MH1979, Ln 16,16A)	\$ 5,604,800	\$ 139,783	\$ 5,744,583
46. Enhanced (Children)	(MH1979, Ln 17,17A)	17,440	1,933	19,373
47. Enhanced (Refugees)	(MH1979, Ln 18)	0	0	0
48. MAA	(MH 1979, Ln 11, 12 & 13)	148,768	(4,088)	144,680
49. Administrative Reimbursement	(MH1979, Ln 6)	1,356,187	30,657	1,386,844
50. U.R. Skilled Professional	(MH1979, Ln 14)	0	111,410	111,410
51. U.R. Other	(MH1979, Ln 15)	167,191	(128,093)	39,098
52. Negotiated Rate-Payback	(MH1979, Ln 20)	0	0	0
53. Subtotal- FFP		<u>\$ 7,294,386</u>	<u>\$ 151,602</u>	<u>\$ 7,445,988</u>

54. Contract Limitation Adjustment	(MH 1979, Ln 22)	\$ 0	\$ 0	\$ 0
55. Quality Assurance Review Results	(Adj #)	0	0	0

56. Total SD/MC Reimbursement - FFP		<u>\$ 7,294,386</u>	<u>\$ 151,602</u>	<u>\$ 7,445,988</u>
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Net Healthy Families Reimbursement - FFP

57. Healthy Families Net Reimbursement	(MH1979, Ln 24,24A)	\$ 20,815	\$ 3,474	\$ 24,289
58. Negotiated Rate Exceed Costs	(MH1979, Ln 26)	0	0	0
59. Administrative Reimbursement	(MH1979, Ln 10)	0	6,161	6,161
60. Total Healthy Families Reimbursement - FFP		<u>\$ 20,815</u>	<u>\$ 9,636</u>	<u>\$ 30,451</u>

61. Total - FFP (Ln 56 + Ln 60)		<u>\$ 7,315,201</u>	<u>\$ 161,238</u>	<u>\$ 7,476,439</u>
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(To Sch. 1)

SAN JOAQUIN COUNTY
SUMMARY OF CONTRACT PROVIDERS' MEDI-CAL COST
FISCAL PERIOD ENDED JUNE 30, 2004

Legal Entity Number	Legal Entity	(1) Medi-Cal and Crossover Gross Cost	(2) Enhanced - Children Gross Cost	(3) Enhanced - Refugees Gross Cost	(4) Total Gross Cost (Excl. HFP)	(5) Healthy Families Gross Cost	(6) Medi-Cal and Crossover Gross Cost	(7) Enhanced - Children Gross Cost	(8) Enhanced - Refugees Gross Cost	(9) Total Gross Cost (Excl. HFP)	(10) Healthy Families Gross Cost
		(MH 1968, Ln 5, 5A, 10, 10A)	(MH 1968, Ln 16, 16A)	(MH 1968, Ln 22)	(Col. 1 to 3)	(MH 1968, Ln 27, 27A)	(MH 1968, Ln 5, 5A, 10, 10A)	(MH 1968, Ln 16, 16A)	(MH 1968, Ln 22)	(Col. 6 to 8)	(MH 1968, Ln 27, 27A)
00125	Phoenix Programs Inc	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	1,911,460	\$ 0	\$ 0	1,911,460	\$ 0
00386	Milhaus Children Services	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	22,648	\$ 0	\$ 0	22,648	\$ 0
00484	Victor Treatment Center Inc.	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	307,230	\$ 7,339	\$ 0	314,569	\$ 232
00730	Delta Health Care	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	58,964	\$ 320	\$ 0	11,183	\$ 0
00731	University of the Pacific	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	333,362	\$ 0	\$ 0	333,362	\$ 0
00879	Valley Community Counselling	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	821,112	\$ 6,623	\$ 0	827,735	\$ 29,085
00949	Crestwood Hospitals Inc.	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	53,956	\$ 0	\$ 0	53,956	\$ 0
00992	Human Services Projects Inc	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	338,926	\$ 0	\$ 0	338,926	\$ 0
01040	Center for Positive Prevention	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	196,005	\$ 0	\$ 0	196,005	\$ 156
01042	Victor Community Support Service	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	2,497,922	\$ 4,184	\$ 0	2,502,106	\$ 26,108
01138	Council for the Spanish Speaking	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	93,416	\$ 602	\$ 0	94,018	\$ 1,647

GRAND TOTAL

\$ 0 \$ 0 \$ 0 \$ 0 \$ 0 \$ 6,635,001 \$ 19,068 \$ 0 \$ 6,605,968 \$ 57,228

SAN JOAQUIN COUNTY
SUMMARY OF CONTRACT PROVIDERS' MEDICAL COST
FISCAL PERIOD ENDED JUNE 30, 2004

Legal Entity Number	Legal Entity	(11) Total Revenue (Excl. HFP)	(12) Healthy Families Revenue	(13) Total Revenue (Excl. HFP)	(14) Healthy Families Revenue	(15) Total Net Cost (Excl. HFP)	(16) Net Cost Healthy Families	(17) Total Net Cost (Excl. HFP)	(18) Net Cost Healthy Families	(19) Total MAA FFP
		I N P A T I E N T		O U T P A T I E N T		I N P A T I E N T		O U T P A T I E N T		Reimbursement
		(MH 1968, Ln 28 to 30)	(MH 1968, Ln 31)	(MH 1968, Ln 28 to 30)	(MH 1968, Ln 31)	(Col 4-11)	(Col 5-12)	(Col 9-13)	(Col 10-14)	(MH 1979, Ln 11-13)
00125	Phoenix Programs Inc	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 1,911,460	\$ 0	\$ 0
00386	Milhaus Children Services	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 22,648	\$ 0	\$ 0
00484	Victor Treatment Center Inc.	\$ 0	\$ 0	\$ 918	\$ 0	\$ 0	\$ 0	\$ 313,651	\$ 232	\$ 0
00730	Delta Health Care	\$ 0	\$ 0	\$ 353	\$ 0	\$ 0	\$ 0	\$ 10,830	\$ 0	\$ 0
00731	University of the Pacific	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 333,362	\$ 0	\$ 0
00879	Valley Community Counselling	\$ 0	\$ 0	\$ 466	\$ 0	\$ 0	\$ 0	\$ 827,269	\$ 29,085	\$ 0
00949	Crestwood Hospitals Inc.	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 53,956	\$ 0	\$ 0
00992	Human Services Projects Inc.	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 338,926	\$ 0	\$ 0
01040	Center for Positive Prevention	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 196,005	\$ 156	\$ 0
01042	Victor Community Support Services	\$ 0	\$ 0	\$ 1,345	\$ 0	\$ 0	\$ 0	\$ 2,500,761	\$ 26,108	\$ 0
01138	Council for the Spanish Speaking	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 94,018	\$ 1,647	\$ 0

GRAND TOTAL	\$ 0	\$ 0	\$ 3,082	\$ 0	\$ 0	\$ 0	\$ 0	\$ 6,602,886	\$ 57,228	\$ 0
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SAN JOAQUIN COUNTY
SUMMARY OF CONTRACT PROVIDERS' MEDICAL COST
FISCAL PERIOD ENDED JUNE 30, 2004

9

Legal Entity Number	Legal Entity	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	(28)
		Neg. Rates Exceed Costs (Excl. HFP)	Neg. Rates Exceed Costs Healthy Families	Neg. Rates Exceed Costs (Excl. HFP)	Neg. Rates Exceed Costs Healthy Families	Total SD/MC Reimbursement (FFP)	Healthy Families Reimbursement (FFP)	Total Reimbursement (FFP)	FFP Contract Maximum	Lower of FFP or Contract Maximum
		INPATIENT		OUTPATIENT						
		(MH 1968, Ln 38 to 39)	(MH 1968, Ln 40, 40A)	(MH 1968, Ln 38 to 39)	(MH 1968, Ln 40, 40A)	(MH 1979, Line 21)	(MH 1979, Ln. 27)	(Col. 24 + 25)		
00125	Phoenix Programs Inc	\$ 0	\$ 0	\$ 0	\$ 0	1,019,778	\$ 0	1,019,778	\$ 1,036,207	\$ 1,019,778
00386	Milhou Children Services	\$ 0	\$ 0	\$ 0	\$ 0	12,067	\$ 0	12,067	\$ 31,593	\$ 12,067
00484	Victor Treatment Center Inc.	\$ 0	\$ 0	\$ 0	\$ 0	163,286	151	163,437	\$ 433,518	\$ 163,437
00730	Delta Health Care	\$ 0	\$ 0	\$ 1,115	\$ 208	31,134	7,217	38,351	\$ 115,846	\$ 38,351
00731	University of the Pacific	\$ 0	\$ 0	\$ 144,892	\$ 0	141,633	\$ 0	141,633	\$ 663,739	\$ 141,633
00879	Valley Community Counselling	\$ 0	\$ 0	\$ 46,834	\$ 1,572	429,553	18,512	448,065	\$ 503,771	\$ 448,065
00949	Crestwood Hospitals Inc.	\$ 0	\$ 0	\$ 1,722	\$ 0	28,279	\$ 0	28,279	\$ 244,463	\$ 28,279
00992	Human Services Projects Inc	\$ 0	\$ 0	\$ 0	\$ 0	181,512	\$ 0	181,512	\$ 418,094	\$ 181,512
01040	Center for Positive Prevention	\$ 0	\$ 0	\$ 24,240	\$ 22	98,331	96	98,427	\$ 117,094	\$ 98,427
01042	Victor Community Support Services	\$ 0	\$ 0	\$ 0	\$ 0	1,334,376	16,970	1,351,346	\$ 1,805,229	\$ 1,351,346
01138	Council for the Spanish Speaking	\$ 0	\$ 0	\$ 0	\$ 0	49,943	1,071	51,014	\$ 400,744	\$ 51,014
GRAND TOTAL		\$ 0	\$ 0	\$ 218,803	\$ 1,802	\$ 3,489,892	\$ 44,017	\$ 3,533,909	\$ 5,770,297	\$ 3,533,909

(To Sch. 1)

SCHEDULE 4

**SAN JOAQUIN COUNTY
COMMUNITY MENTAL HEALTH SERVICES
COMPUTATION OF EPSDT STATE SHARE PER AUDIT
FISCAL YEAR ENDED JUNE 30, 2004**

	<u>As Settled</u>	<u>Audit Adjustments</u>	<u>As Audited</u>
(1) SD/MC Actuals (MH 1979, Lns. 16, 16A, 17, 17A, 18) (including contractors)	16,949,424	457,928	17,407,352
(2) Total SD/MC Claims	18,360,430	(81,684)	18,278,746
(3) Percent % (Line 1/Line 2)	92.31%	2.92%	95.23%
(4) EPSDT Claims	8,101,641	(81,684)	8,019,957
(5) Actual Cost Settled EPSDT SD/MC (Line 3 X Line 4)	7,478,625	158,780	7,637,405
(6) Cost Settled Baseline for EPSDT	2,013,987	0	2,013,987
(7) Net Cost Settlement Amount (Line 5 - Line 6)	5,464,638	158,780	5,623,418
(8) 46.7% of Cost Settlement Amount (Line 7 x 46.7%)	2,551,986	74,150	2,626,136
(8a) -FY-2001-02 EPSDT Settlement	2,372,675	0	2,372,675
(8b) Annual Local Growth (L. 8 - 8a)	179,311	74,150	253,461
(9) County Match 10% of Local Growth (8b x 10%)	17,931	7,415	25,346
(10) Net Cost Settlement Amount (L. 8 - 9)	2,534,055	66,735	2,600,790
(11) SGF Distribution (Settled and Audited)	2,534,055	(29,153)	2,504,902
(12) SGF Due County (State)	<u>0</u>	<u>95,888</u>	<u>95,888</u>
			(To Sch. 1)

Source:

- (1) Total CFRS SD/MC actuals after final Settlement (Col. 1) and Audit (Col. 3) for Net Direct Outpatient Services (includes Mode 05 - SF's 20-94, Mode 10, and Mode 15)
- (2) Total SD/MC paid claims (total non-hospital, including PHF's) by County Submitting Claims (includes contract providers, excludes Healthy Families)
- (4) SD/MC paid claims for children under 21 years of age (full scope, non-hospital, including PHF's) including new aid codes by County of Beneficiary
- (6) Cost Settled Baseline for EPSDT for FY 2001-2002, includes increase for FFS/MC provider rate increase
- (9) SGF gross distribution (See DMH letter dated January 14, 2002 sent to Local Mental Health Directors) Includes adjustment for additional SGF and ASO non participants
- (10) Amount owed back to the state cannot be more than was advanced or settled.

Note:

The increase in SGF was due to the increase in costs and Medi-Cal units county understated, and the increase in cost per unit as a result of the decrease in total unit of service in which County mistakenly report provider's units under county.

AUDIT ADJUSTMENTS

Provider SAN JOAQUIN COUNTY				Provider Number 00039	No. of Adj. 117	Fiscal Period Ended June 30, 2004	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED COSTS</u>			
1	MH 1960	1	C	MENTAL HEALTH EXPENDITURES To adjust mental health expenditures to agree with County's Auditor-Controller's report.	\$ 54,319,339	\$ (1,327,121)	\$ 52,992,218
2	MH 1960	3	C	PAYMENTS TO CONTRACT PROVIDERS To adjust Payments to Contract Providers to agree with County's records.	\$ (13,164,895)	\$ 147,877	\$ (13,017,018) *
3	MH 1960	4	C	OTHER ADJUSTMENTS FROM MH 1962 To adjust Other Adjustment to agree with County's Records.	\$ (4,316,807)	\$ 1,442,019	\$ (2,874,788) *
4	MH 1960	4	C	OTHER ADJUSTMENTS FROM MH 1962 To reclassify the depreciation expenses as Medi-Cal Adjustment.	** \$ (2,874,788)	\$ (279,630)	\$ (3,154,418)
5	MH 1960	7	C	MANAGED CARE CONSOLIDATION To zero out Managed Care Inpatient which is not included on Line 1, MH 1960.	\$ (536,015)	\$ 536,015	\$ -
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				SAN JOAQUIN COUNTY		Provider Number	No. of Adj.	Fiscal Period Ended	
						00039	117	June 30, 2004	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS			As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.						
<u>ADJUSTMENTS TO REPORTED COSTS</u>									
6	MH 1960	6	3	MEDI-CAL ADJUSTMENT FROM MH 1961			\$ (11,594)	\$ 39,901	\$ 28,307
To adjust depreciation expenses to agree with County's records.									
7	MH 1960	6	3	MEDI-CAL ADJUSTMENT FROM MH 1961			\$ 28,307	\$ 279,630	\$ 307,937
To reclassify depreciation expenses to reflect adjustment number 4.									
<div>39,901 Admin. 333,875</div> <div><u>279,630</u> Direct (14,344)</div> <div>319,531</div>									
8	MH 1960	9	C	SD/MC ADMINISTRATION			\$ 5,446,300	\$ (5,446,300)	\$ -
info	MH 1960	10	C	HEALTHY FAMILIES ADMINISTRATION			-	-	-
info	MH 1960	11	C	NON-SD/MC ADMINISTRATION			-	-	-
	MH 1960	12	C	TOTAL ADMINISTRATIVE COSTS			<u>5,446,300</u>		<u>5,446,300</u> *
To eliminate the reported allocation of Administrative Costs. Administrative costs will be redistributed to the proper cost centers after adjustments to administrative costs are made below.									
9	MH 1960	12	C	TOTAL ADMINISTRATIVE COSTS			** \$ 5,446,300	\$ 333,875	\$ 5,780,175 *
To adjust depreciation expenses to agree with County's records.									
10	MH 1960	12	C	TOTAL ADMINISTRATIVE COSTS			** \$ 5,780,175	\$ 245,230	\$ 6,025,405 *
To adjust Administrative Cost to agree with County's records.									
* Balance carried forward to subsequent adjustment.									
** Balance brought forward from prior adjustment.									

AUDIT ADJUSTMENTS

Provider SAN JOAQUIN COUNTY				Provider Number 00039	No. of Adj. 117	Fiscal Period Ended June 30, 2004	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED COST</u>			
11	MH 1960	9	C	SD/MC ADMINISTRATION	\$ -	\$ 4,112,360	\$ 4,112,360
12	MH 1960	10	C	HEALTHY FAMILIES ADMINISTRATION		14,440	14,440
13	MH 1960	11	C	NON SD/MC ADMINISTRATION		1,898,605	1,898,605
	MH 1960	12	C	TOTAL ADMINISTRATIVE COSTS	** <u>6,025,405</u>		<u>6,025,405</u>
				To allocate Total Administrative Costs between SD/MC, Healthy Families, and Non-SD/MC Administration based on the Medi-Cal recipients percentages			
14	MH 1960	13	C	SKILLED PROFESSIONAL MEDICAL PERSONNEL	\$ -	\$ 148,547	\$ 148,547
15	MH 1960	14	C	OTHER SD/MC UTILIZATION REVIEW	334,382	\$ (256,187)	78,195
16	MH 1960	15	C	NON-SD/MC UTILIZATION REVIEW	-	\$ 107,640	107,640
info		16	C	TOTAL UTILIZATION REVIEW COSTS	<u>334,382</u>		<u>334,382</u> *
				To eliminate the reported allocation of Skilled Professional Medi-Cal Personnel, Other SD/MC Utilization Review, and Non-SD/MC Utilization Review. Cost will be redistributed to the proper cost centers after adjustments to Utilization Review Costs are made below.			
17	MH1960	18	C	MODE COSTS (DIRECT SERVICES AND MAA)	\$ 30,509,346	\$ 259,586	\$ 30,768,932
				To reflect adjustment #1, 2, 4, 5, 7, 8.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider SAN JOAQUIN COUNTY				Provider Number 00039	No. of Adj. 117	Fiscal Period Ended June 30, 2004	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO ALLOCATION OF COSTS TO MODES OF SERVICE</u>			
20	MH 1964	3	A	OTHER 24 HOUR SERVICES (MODE 05-ALL OTHER SFC)	\$ 5,753,569	418,878	\$ 6,172,447
info	MH 1964	4	A	DAY SERVICES (MODE 10)	1,583,887	(0)	1,583,887
21	MH 1964	5	A	OUTPATIENT SERVICES (MODE 15 PROGRAM 1 + PROGRAM 2)	18,591,302	241,288	18,832,590
22	MH 1964	6	A	OUTREACH SERVICES (MODE 45)	422,937	661,459	1,084,396
info	MH 1964	7	A	MEDI-CAL ADMINISTRATIVE ACTIVITIES (MODE 55)	369,662	-	369,662
23	MH 1964	8	A	SUPPORT SERVICES (MODE 60)	3,787,989	(1,062,039)	2,725,950
info				TOTAL	<u>\$ 30,509,346</u>	<u>\$ 259,586</u>	<u>\$ 30,768,932</u>
				To distribute revised Direct Services cost to Other 24 Hour Services, Day Services, Outpatient Services, Outreach Services, MAA, and Support Services			
	MH 1901A	55	H	MEDI-CAL ELIGIBILITY FACTOR	70.43%	-1.94%	68.49%
				To adjust Medi-Cal Eligibility Factor to agree with County's record.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider SAN JOAQUIN COUNTY				Provider Number 00039	No. of Adj. 117	Fiscal Period Ended June 30, 2004	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED REVENUES</u> <u>COUNTY PROVIDER</u>			
24	MH 1901B		K	MEDI-CAL PATIENT AND OTHER PAYOR REVENUES 07/01/03 To 09/30/03	\$ -	\$ 3,221	\$ 3,221
25	MH 1901B		L	MEDI-CAL PATIENT AND OTHER PAYOR REVENUES 10/01/03 To 06/30/04	4,817	745	5,562
info	MH 1901B		O	3RD PARTY REVENUES (CHILDREN)	-	-	-
info	MH 1901B		Q	3RD PARTY REVENUES (REFUGEES)	-	-	-
26	MH 1901B		T	3RD PARTY REVENUES (HEALTHY FAMILIES)	-	194	194
				TOTAL	<u>4,817</u>	<u>4,160</u>	<u>8,977</u>
				To adjust Crossover Revenues to agree with County's records.			
				<u>ADJUSTMENTS TO REPORTED REVENUES</u> <u>CONTRACT PROVIDER</u>			
27	MH 1901B		K	MEDI-CAL PATIENT AND OTHER PAYOR REVENUES 07/01/03 To 09/30/03	\$ -	\$ 6,889	\$ 6,889
28	MH 1901B		L	MEDI-CAL PATIENT AND OTHER PAYOR REVENUES 10/01/03 To 06/30/04	12,370	1,777	14,147
info	MH 1901B		O	3RD PARTY REVENUES (CHILDREN)	-	-	-
info	MH 1901B		Q	3RD PARTY REVENUES (REFUGEES)	-	-	-
info	MH 1901B		T	3RD PARTY REVENUES (HEALTHY FAMILIES)	-	-	-
				TOTAL	<u>12,370</u>	<u>8,666</u>	<u>21,036</u>
				To adjust Crossover Revenues to agree with County's records.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider SAN JOAQUIN COUNTY				Provider Number 00039	No. of Adj. 117	Fiscal Period Ended June 30, 2004	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED SD/MC UNITS COUNTY PROVIDERS - PROGRAMS 1 AND 2</u>			
29	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/03 to 09/30/03	1,302,611	(340,962)	961,649 *
30	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/03 to 06/30/04	2,307,059	498,024	2,805,083 *
31	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03	22,556	(6,433)	16,123 *
32	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04	31,144	35,223	66,367 *
33	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/03 to 09/30/03	2,763	(964)	1,799 *
34	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/03 to 06/30/04	3,490	2,352	5,842 *
Info	MH 1966A	10B	Total	ENHANCED - REFUGEES	-	-	-
35	MH 1966A	11	Total	HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03	6,180	(1,953)	4,227 *
36	MH 1966A	11A	Total	HEALTHY FAMILIES UNITS - 10/01/03 to 06/30/04	5,035	5,002	10,037 *
Info				TOTAL	<u>3,680,838</u>	<u>190,289</u>	<u>3,871,127</u>
				To adjust the as settled (MH 1966A) SD/MC units of service/time for the county operated facilities to agree with the State DMH Approved Claims Report dated July 24, 2008 (including disallowed claims). Above adjustments include Phase II. Copies of workpapers detailing adjustments by service functions have been provided to the County.			
Info	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/03 to 09/30/03	** 961,649	-	961,649 *
37	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/03 to 06/30/04	** 2,805,083	(711)	2,804,372 *
Info	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03	** 16,123	-	16,123 *
38	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04	** 66,367	(86)	66,281 *
Info	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/03 to 09/30/03	** 1,799	-	1,799 *
Info	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/03 to 06/30/04	** 5,842	-	5,842 *
Info	MH 1966A	10B	Total	ENHANCED - REFUGEES	** -	-	-
Info	MH 1966A	11	Total	HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03	** 4,227	-	4,227 *
Info	MH 1966A	11A	Total	HEALTHY FAMILIES UNITS - 10/01/03 to 06/30/04	** 10,037	-	10,037 *
Info				TOTAL	<u>3,871,127</u>	<u>(797)</u>	<u>3,870,330</u>
				To adjust the State DMH Approved Claims Report dated July 24, 2008 to exclude the County's Non EPSDT disallowed units in DCS .			
				* Balance carried forward to subsequent adjustment. ** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider SAN JOAQUIN COUNTY				Provider Number 00039	No. of Adj. 117	Fiscal Period Ended June 30, 2004	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED SD/MC UNITS</u> <u>COUNTY PROVIDERS - PROGRAMS 1 AND 2</u>			
Info	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/03 to 09/30/03	** 961,649	-	961,649 *
39	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/03 to 06/30/04	** 2,804,372	(5,160)	2,799,212 *
Info	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03	** 16,123	-	16,123 *
Info	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04	** 66,281	-	66,281 *
Info	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/03 to 09/30/03	** 1,799	-	1,799 *
40	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/03 to 06/30/04	** 5,842	(20)	5,822 *
Info	MH 1966A	10B	Total	ENHANCED - REFUGEES	** -	-	- *
Info	MH 1966A	11	Total	HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03	** 4,227	-	4,227 *
Info	MH 1966A	11A	Total	HEALTHY FAMILIES UNITS - 10/01/03 to 06/30/04	** 10,037	-	10,037 *
41				TOTAL	<u>3,870,330</u>	<u>(5,180)</u>	<u>3,865,150</u>
				To adjust the State DMH Approved Claims Report dated July 24, 2008 to exclude the County's EPSDTdisallowed units in DCS .			
Info	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/03 to 09/30/03	** 961,649	-	961,649 *
42	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/03 to 06/30/04	** 2,799,212	(36,983)	2,762,229 *
Info	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03	** 16,123	-	16,123 *
Info	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04	** 66,281	-	66,281 *
Info	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/03 to 09/30/03	** 1,799	-	1,799 *
Info	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/03 to 06/30/04	** 5,822	-	5,822 *
Info	MH 1966A	10B	Total	ENHANCED - REFUGEES	** -	-	- *
Info	MH 1966A	11	Total	HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03	** 4,227	-	4,227 *
Info	MH 1966A	11A	Total	HEALTHY FAMILIES UNITS - 10/01/03 to 06/30/04	** 10,037	-	10,037 *
43				TOTAL	<u>3,865,150</u>	<u>(36,983)</u>	<u>3,828,167</u>
				To adjust the State DMH Approved Claims Report dated July 24, 2008 to incorporate the results of the EPSDT audit findings. This audit was conducted by the State DMH Oversight Branch.			
				* Balance carried forward to subsequent adjustment. ** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				Provider Number	No. of Adj.	Fiscal Period Ended	
SAN JOAQUIN COUNTY				00039	117	June 30, 2004	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED SD/MC UNITS</u> <u>COUNTY PROVIDERS - PROGRAMS 1 AND 2</u>			
44	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/03 to 09/30/03	** 961,649	(6,000)	955,649 *
45	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/03 to 06/30/04	** 2,762,229	52,377	2,814,606 *
46	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03	** 16,123	(918)	15,205 *
47	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04	** 66,281	(1,370)	64,911 *
48	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/03 to 09/30/03	** 1,799	(31)	1,768 *
49	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/03 to 06/30/04	** 5,822	(16)	5,806 *
Info	MH 1966A	10B	Total	ENHANCED - REFUGEES	** -	-	- *
50	MH 1966A	11	Total	HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03	** 4,227	(1,040)	3,187 *
51	MH 1966A	11A	Total	HEALTHY FAMILIES UNITS - 10/01/03 to 06/30/04	** 10,037	(231)	9,806 *
52				TOTAL	<u>3,828,167</u>	<u>42,771</u>	<u>3,870,938</u>
				To adjust the SD/MC, Enhanced, Healthy Families units of service/time to agree with county's records (including disallowance). Above adjustments include Phase II. Copies of workpapers detailing adjustments by service functions have been provided to the County.			
Info	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/03 to 09/30/03	** 955,649	-	955,649 *
53	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/03 to 06/30/04	** 2,814,606	(711)	2,813,895 *
Info	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03	** 15,205	-	15,205 *
54	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04	** 64,911	(86)	64,825 *
Info	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/03 to 09/30/03	** 1,768	-	1,768 *
Info	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/03 to 06/30/04	** 5,806	-	5,806 *
Info	MH 1966A	10B	Total	ENHANCED - REFUGEES	** -	-	- *
Info	MH 1966A	11	Total	HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03	** 3,187	-	3,187 *
Info	MH 1966A	11A	Total	HEALTHY FAMILIES UNITS - 10/01/03 to 06/30/04	** 9,806	-	9,806 *
55				TOTAL	<u>3,870,938</u>	<u>(797)</u>	<u>3,870,141</u>
				To adjust County's record to account for the Non EPSDT units of services/time that the County adjusted out when utilizing the disallowed claims system (DCS).			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider SAN JOAQUIN COUNTY				Provider Number 00039	No. of Adj. 117	Fiscal Period Ended June 30, 2004	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED SD/MC UNITS COUNTY PROVIDERS - PROGRAMS 1 AND 2</u>			
Info	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/03 to 09/30/03	** 955,649	-	955,649 *
56	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/03 to 06/30/04	** 2,813,895	(5,160)	2,808,735 *
Info	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03	** 15,205	-	15,205 *
Info	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04	** 64,825	-	64,825 *
Info	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/03 to 09/30/03	** 1,768	-	1,768 *
57	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/03 to 06/30/04	** 5,806	(20)	5,786 *
Info	MH 1966A	10B	Total	ENHANCED - REFUGEES	** -	-	- *
Info	MH 1966A	11	Total	HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03	** 3,187	-	3,187 *
Info	MH 1966A	11A	Total	HEALTHY FAMILIES UNITS - 10/01/03 to 06/30/04	** 9,806	-	9,806 *
58				TOTAL	<u>3,870,141</u>	<u>(5,180)</u>	<u>3,864,961</u>
				To adjust County's record to account for the EPSDT units of services/time that the County adjusted out when utilizing the disallowed claims system (DCS).			
Info	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/03 to 09/30/03	** 955,649	-	955,649 *
59	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/03 to 06/30/04	** 2,808,735	(36,983)	2,771,752 *
Info	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03	** 15,205	-	15,205 *
Info	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04	** 64,825	-	64,825 *
Info	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/03 to 09/30/03	** 1,768	-	1,768 *
Info	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/03 to 06/30/04	** 5,786	-	5,786 *
Info	MH 1966A	10B	Total	ENHANCED - REFUGEES	** -	-	- *
Info	MH 1966A	11	Total	HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03	** 3,187	-	3,187 *
Info	MH 1966A	11A	Total	HEALTHY FAMILIES UNITS - 10/01/03 to 06/30/04	** 9,806	-	9,806 *
60				TOTAL	<u>3,864,961</u>	<u>(36,983)</u>	<u>3,827,978</u>
				To adjust the County's records to incorporate the results of the EPSDT audit findings. This audit was conducted by the State DMH Oversight Branch.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider SAN JOAQUIN COUNTY				Provider Number 00039	No. of Adj. 117	Fiscal Period Ended June 30, 2004	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED SD/MC UNITS COUNTY PROVIDERS - PROGRAMS 1 AND 2</u>			
61	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/03 to 09/30/03	** 955,649	(7,727)	947,922
62	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/03 to 06/30/04	** 2,771,752	(23,755)	2,747,997
63	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03	** 15,205	918	16,123
64	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04	** 64,825	1,456	66,281
65	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/03 to 09/30/03	** 1,768	(29)	1,739
66	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/03 to 06/30/04	** 5,786	(208)	5,578
Info	MH 1966A	10B	Total	ENHANCED - REFUGEES	** -	-	0
Info	MH 1966A	11	Total	HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03	** 3,187	-	3,187
Info	MH 1966A	11A	Total	HEALTHY FAMILIES UNITS - 10/01/03 to 06/30/04	** 9,806	-	9,806
67				TOTAL	<u>3,827,978</u>	<u>(29,345)</u>	<u>3,798,633</u>
				To adjust SD/MC units to incorporate the controls of the lower of the County records or the State DMH Approved Claims Report by SFC. Above adjustments include Phase II. Copies of workpapers detailing adjustments by service functions have been provided to the county.			
				* Balance carried forward to subsequent adjustment. ** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider SAN JOAQUIN COUNTY				Provider Number 00039	No. of Adj. 117	Fiscal Period Ended June 30, 2004	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED SD/MC UNITS CONTRACT PROVIDERS</u>			
68	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/03 to 09/30/03	834,540	(229,056)	605,484 *
69	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/03 to 06/30/04	1,399,096	254,391	1,653,487 *
70	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03	-	-	- *
71	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04	-	-	- *
72	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/03 to 09/30/03	60	540	600 *
73	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/03 to 06/30/04	4,252	1,010	5,262 *
74	MH 1966A	10B	Total	ENHANCED - REFUGEES	-	-	- *
75	MH 1966A	11	Total	HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03	7,951	(4,282)	3,669 *
76	MH 1966A	11A	Total	HEALTHY FAMILIES UNITS - 10/01/03 to 06/30/04	30,347	8,470	38,817 *
77				TOTAL	<u>2,276,246</u>	<u>31,073</u>	<u>2,307,319</u>
				To adjust the as settled (MH 1966A) SD/MC units of service/time for the Contract Providers to agree with the State DMH Approved Claims Report dated July 24, 2008 (including disallowed claims). Above adjustments include Phase II. Copies of workpapers detailing adjustments by service functions have been provided to the County.			
Info	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/03 to 09/30/03	** 605,484	-	605,484 *
78	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/03 to 06/30/04	** 1,653,487	(3,869)	1,649,618 *
Info	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03	** -	-	- *
Info	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04	** -	-	- *
Info	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/03 to 09/30/03	** 600	-	600 *
Info	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/03 to 06/30/04	** 5,262	-	5,262 *
Info	MH 1966A	10B	Total	ENHANCED - REFUGEES	** -	-	- *
Info	MH 1966A	11	Total	HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03	** 3,669	-	3,669 *
Info	MH 1966A	11A	Total	HEALTHY FAMILIES UNITS - 10/01/03 to 06/30/04	** 38,817	-	38,817 *
Info				TOTAL	<u>2,307,319</u>	<u>(3,869)</u>	<u>2,303,450</u>
				To adjust the State DMH Approved Claims Report dated July 24, 2008 to exclude the County's EPSDT disallowed units in DCS. (There are no EPSDT audit findings conducted by the State DMH Oversight Branch).			
				* Balance carried forward to subsequent adjustment. ** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider SAN JOAQUIN COUNTY				Provider Number 00039	No. of Adj. 117	Fiscal Period Ended June 30, 2004	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED SD/MC UNITS CONTRACT PROVIDERS</u>			
79	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/03 to 09/30/03	** 605,484	(270)	605,214 *
80	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/03 to 06/30/04	** 1,649,618	8,205	1,657,823 *
Info	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03	** -	-	- *
Info	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04	** -	-	- *
Info	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/03 to 09/30/03	** 600	-	600 *
81	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/03 to 06/30/04	** 5,262	623	5,885 *
Info	MH 1966A	10B	Total	ENHANCED - REFUGEES	** -	-	- *
82	MH 1966A	11	Total	HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03	** 3,669	270	3,939 *
83	MH 1966A	11A	Total	HEALTHY FAMILIES UNITS - 10/01/03 to 06/30/04	** 38,817	(6,074)	32,743 *
84				TOTAL	<u>2,303,450</u>	<u>2,754</u>	<u>2,306,204</u>
				To adjust the SD/MC, Enhanced, Healthy Families units of service/time to agree with county's records (including disallowance). Above adjustments include Phase II. Copies of workpapers detailing adjustments by service functions have been provided to the County.			
Info	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/03 to 09/30/03	** 605,214	-	605,214 *
85	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/03 to 06/30/04	** 1,657,823	(3,869)	1,653,954 *
Info	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03	** -	-	- *
Info	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04	** -	-	- *
Info	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/03 to 09/30/03	** 600	-	600 *
Info	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/03 to 06/30/04	** 5,885	-	5,885 *
Info	MH 1966A	10B	Total	ENHANCED - REFUGEES	** -	-	- *
Info	MH 1966A	11	Total	HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03	** 3,939	-	3,939 *
Info	MH 1966A	11A	Total	HEALTHY FAMILIES UNITS - 10/01/03 to 06/30/04	** 32,743	-	32,743 *
Info				TOTAL	<u>2,306,204</u>	<u>(3,869)</u>	<u>2,302,335</u>
				To adjust County's record to account for the EPSDT units of services/time that the County adjusted out when utilizing the disallowed claims system (DCS).			
				* Balance carried forward to subsequent adjustment. ** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider SAN JOAQUIN COUNTY				Provider Number 00039	No. of Adj. 117	Fiscal Period Ended June 30, 2004	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED SD/MC UNITS</u> <u>CONTRACT PROVIDERS</u>			
86	MH 1966A	8	Total	MEDI-CAL UNITS - 07/01/03 to 09/30/03	** 605,214	(1,946)	603,268
87	MH 1966A	8A	Total	MEDI-CAL UNITS - 10/01/03 to 06/30/04	** 1,653,954	(10,403)	1,643,551
Info	MH 1966A	9	Total	MEDICARE/MEDI-CAL UNITS - 07/01/03 to 09/30/03	** -	-	-
Info	MH 1966A	9A	Total	MEDICARE/MEDI-CAL UNITS - 10/01/03 to 06/30/04	** -	-	-
Info	MH 1966A	10	Total	ENHANCED - CHILDREN - 07/01/03 to 09/30/03	** 600	-	600
88	MH 1966A	10A	Total	ENHANCED - CHILDREN - 10/01/03 to 06/30/04	** 5,885	(878)	5,007
Info	MH 1966A	10B	Total	ENHANCED - REFUGEES	** -	-	-
89	MH 1966A	11	Total	HEALTHY FAMILIES UNITS - 07/01/03 to 09/30/03	** 3,939	(270)	3,669
Info	MH 1966A	11A	Total	HEALTHY FAMILIES UNITS - 10/01/03 to 06/30/04	** 32,743	-	32,743
90				TOTAL	<u>2,302,335</u>	<u>(13,497)</u>	<u>2,288,838</u>
				To adjust SD/MC units to incorporate the controls of the lower of the County records or the State DMH Approved Claims Report by SFC. Above adjustments include Phase II. Copies of workpapers detailing adjustments by service functions have been provided to the county.			
				* Balance carried forward to subsequent adjustment. ** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider SAN JOAQUIN COUNTY				Provider Number 00039	No. of Adj. 117	Fiscal Period Ended June 30, 2004	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED TOTAL UNITS - COUNTY</u>			
info	MH 1966A	2		TOTAL UNITS-MODE 05-20	13,221	-	13,221
info	MH 1966A	2		TOTAL UNITS-MODE 10-81	2,976	-	2,976
91	MH 1966A	2		TOTAL UNITS-MODE 10-95	13,195	(3,194)	10,001
92	MH 1966A	2		TOTAL UNITS-MODE 15-01	1,228,374	(56,039)	1,172,335
93	MH 1966A	2		TOTAL UNITS-MODE 15-10	413,230	(13,541)	399,689
94	MH 1966A	2		TOTAL UNITS-MODE 15-30	2,514,550	(45,236)	2,469,314
95	MH 1966A	2		TOTAL UNITS-MODE 15-60	1,371,147	68	1,371,215
96	MH 1966A	2		TOTAL UNITS-MODE 15-70	568,080	(276)	567,804
info	MH 1966A	2		TOTAL UNITS-MODE 15-30 FFS Psychiatrist	1,350	-	1,350
info	MH 1966A	2		TOTAL UNITS-MODE 15-60 FFS Psychiatrist	7,410	-	7,410
info	MH 1966A	2		TOTAL UNITS-MODE 15-10 FFS Psychologist	240	-	240
info	MH 1966A	2		TOTAL UNITS-MODE 15-30 FFS Psychologist	1,140	-	1,140
info	MH 1966A	2		TOTAL UNITS-MODE 15-10 FFS LCSW	32,850	-	32,850
info	MH 1966A	2		TOTAL UNITS-MODE 15-30 FFS LCSW	32,175	-	32,175
info	MH 1966A	2		TOTAL UNITS-MODE 15-10 FFS LMFT	45,600	-	45,600
info	MH 1966A	2		TOTAL UNITS-MODE 15-30 FFS LMFT	50,760	-	50,760
info	MH 1966A	2		TOTAL UNITS-MODE 15-100 ASO	1,140	-	1,140
info	MH 1966A	2		TOTAL UNITS-MODE 15-30 ASO	33,990	-	33,990
info	MH 1966A	2		TOTAL UNITS-MODE 15-60 ASO	900	-	900
97					<u>6,332,328</u>	<u>(118,218)</u>	<u>6,214,110</u>
				To adjust the Total Units to agree with County's records.			
				<u>ADJUSTMENTS TO REPORTED TOTAL UNITS - PROVIDERS</u>			
98	MH 1966A	2		TOTAL UNITS-MODE 15-10 (LE 731)	5,452	226	5,678
99	MH 1966A	2		TOTAL UNITS-MODE 15-30 (LE 731)	166,459	6,328	172,787
100	MH 1966A	2		TOTAL UNITS-MODE 15-10 (LE 1040)	12,800	(4,500)	8,300
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider SAN JOAQUIN COUNTY				Provider Number 00039	No. of Adj. 117	Fiscal Period Ended June 30, 2004	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO REPORTED SD/MC SETTLEMENT COUNTY PROVIDERS</u>			
101	MH 1979	2	D	CONTRACT PROVIDER MEDI-CAL DIRECT SERVICE GROSS REIMB To adjust reported Contract Provider Direct Medi-Cal Gross Reimbursement as a result of adjustments to the contract providers SD/MC units of service/time.	\$ 7,567,402	\$ 110,596	\$ 7,677,998
102	MH 1979	23	J	TOTAL SD/MC REIMBURSEMENT (INCLUDES ENHANCED SD/MC)	\$ 7,294,386	\$ 151,602	\$ 7,445,988
103	MH 1979	27	J	TOTAL HEALTHY FAMILIES REIMBURSEMENT	\$ 20,815	\$ 9,636	\$ 30,451
					<u>7,315,201</u>	<u>161,238</u>	<u>7,476,439</u>
				To adjust the SD/MC (FFP), Enhanced (FFP) and Healthy Families (FFP) due to adjustments to costs, revenues, units of service/time and the results of the Medical Oversight audit.			
				<u>ADJUSTMENTS TO REPORTED SD/MC SETTLEMENT CONTRACT PROVIDERS</u>			
104	MH 1979	23	J	TOTAL SD/MC REIMBURSEMENT (INCLUDES ENHANCED SD/MC)	\$ 3,420,453	\$ 69,439	\$ 3,489,892
105	MH 1979	27	J	TOTAL HEALTHY FAMILIES REIMBURSEMENT	\$ 61,027	\$ (17,010)	\$ 44,017
					<u>3,481,480</u>	<u>52,429</u>	<u>3,533,909</u>
				To adjust the SD/MC (FFP) and Healthy Families (FFP) due to adjustments to revenues and units of service/time and the results of the Medical Oversight audit.			
				* Balance carried forward to subsequent adjustment.			
				** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider SAN JOAQUIN COUNTY				Provider Number 00039	No. of Adj. 117	Fiscal Period Ended June 30, 2004	
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS	As Reported	Increase (Decrease)	As Adjusted
Adj. No.	Form/ Sch.	Line	Col.				
				<u>ADJUSTMENTS TO AS SETTLED EPSDT STATE GENERAL FUNDS</u>			
106	SCH 4	1	3	SD/MC ACTUALS To adjust SD/MC actuals as a result of adjustments to total computable Medical Costs as reflected in the MH 1979 forms for both the County Program and its contract providers. The amounts utilized for this purpose was SD/MC and Enhanced for Outpatient services only.	\$ 16,949,424	\$ 457,928	\$ 17,407,352
107	SCH 4	2	3	TOTAL SD/MC CLAIMS	\$ 18,360,430	\$ (81,684)	\$ 18,278,746 *
108	SCH 4	4	3	EPSDT CLAIMS To adjust total SD/MC claims and EPSDT claims to include the results of the Department's audit of the EPSDT Program conducted by the State Department of Mental Health as reflected in the report dated August 23, 2005. This report covered the period from April 1, 2004 through June 30, 2004.	\$ 8,101,641	\$ (81,684)	\$ 8,019,957 *
109	SCH 4	2	3	TOTAL SD/MC CLAIMS	** \$ 18,278,746	\$ 81,684	\$ 18,360,430 *
110	SCH 4	4	3	EPSDT CLAIMS To adjust total SD/MC claims and EPSDT claims to reverse the original recoupment included in adjustments 107 and 108 above. The revised findings affecting "Total SD/MC Claims and EPSDT Claims" will be taken in adjustments 100 and 101 below.	** \$ 8,019,957	\$ 81,684	\$ 8,101,641 *
111	SCH 4	2	3	TOTAL SD/MC CLAIMS	\$ 18,360,430	\$ (81,684)	\$ 18,278,746
112	SCH 4	4	3	EPSDT CLAIMS To adjust total SD/MC claims and EPSDT claims to include the results of the Department's revised audit of the EPSDT Program conducted by the State Department of Mental Health as reflected in the report dated March 3, 2008. The Report covered the period from April 1, 2004 through June 30, 2004. This represents the revised recoupment.	\$ 8,101,641	\$ (81,684)	\$ 8,019,957
				* Balance carried forward to subsequent adjustment. ** Balance brought forward from prior adjustment.			

AUDIT ADJUSTMENTS

Provider				SAN JOAQUIN COUNTY		Provider Number		No. of Adj.		Fiscal Period Ended			
						00039		117		June 30, 2004			
Report Reference				EXPLANATION OF AUDIT ADJUSTMENTS				As Reported		Increase (Decrease)		As Adjusted	
Adj. No.	Form/ Sch.	Line	Col.										
				<u>ADJUSTMENTS TO AS SETTLED EPSDT STATE GENERAL FUNDS</u>									
113	SCH 4	10	3	NET COST SETTLEMENT AMOUNT				\$	2,534,055	\$	66,735	\$	2,600,790
				To adjust Net cost settlement amount as a result of adjustments to SD/MC actuals (Total Computable Medical), total SD/MC claims and EPSDT claims.									
114	SCH 4	11	3	STATE GENERAL FUND DISTRIBUTION				\$	2,534,055	\$	(29,153)	\$	2,504,902 *
				To adjust State General Fund Distribution to include the results of the Department's audit of the EPSDT Program conducted by the State Department of Mental Health as reflected in the report dated August 23, 2005. The Report covered the period from April 1, 2004 through June 30, 2004. This represents the SGF original recoupment.									
115	SCH 4	11	3	STATE GENERAL FUND DISTRIBUTION				** \$	2,504,902	\$	29,153	\$	2,534,055 *
				To adjust State General Fund Distribution to reverse the original SGF recoupment included in adjustment 114 above. The revised findings affecting "State General Fund Distribution" will be taken in adjustments 116 below.									
116	SCH 4	11	3	STATE GENERAL FUND DISTRIBUTION				** \$	2,534,055	\$	(29,153)	\$	2,504,902
				To adjust the State General Fund Distribution to reflect the results of the revised EPSDT findings included in the final report dated March 3, 2008.									
117	SCH 4	12	3	STATE GENERAL FUNDS DUE STATE				\$	-	\$	95,888	\$	95,888
				To adjust State General Funds due State as a result of adjustments to Cost Settlement Amount and State General Fund Distribution as follows:									
				Audited Net Cost Settlement Amount									

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

CALCULATION OF PROGRAM COSTS

MH 1960 (08/04)

FISCAL YEAR 2003 - 2004

County: SAN JOAQUIN

County Code: 39

Legal Entity: SAN JOAQUIN COUNTY		A	B	C
Legal Entity Number: 00039		Salaries and Benefits	Other	Total Costs
1	Mental Health Expenditures	29,047,257	23,944,961	52,992,218
2	Encumbrances			
3	Less: Payments to Contract Providers (County Only)		(13,017,018)	(13,017,018)
4	Other Adjustments from MH 1962	(241)	(3,154,177)	(3,154,418)
5	Total Costs Before Medi-Cal Adjustments	29,047,016	7,773,766	36,820,782
6	Medi-Cal Adjustments from MH 1961		307,937	307,937
7	Managed Care Consolidation (County Only)			
8	Allowable Costs for Allocation			37,128,719
Administrative Costs (County Only)				
9	SD/MC Administration			4,112,360
10	Healthy Families Administration			14,440
11	Non-SD/MC Administration			1,898,605
12	Total Administrative Costs			6,025,405
Utilization Review Costs (County Only)				
13	Skilled Professional Medical Personnel			148,547
14	Other SD/MC Utilization Review			78,195
15	Non-SD/MC Utilization Review			107,640
16	Total Utilization Review Costs			334,382
17	Research and Evaluation (County Only)			0
18	Mode Costs (Direct Service and MAA)			30,768,932
19	Total Costs - Lines 9 through 18			37,128,719

Crosscheck

30,768,932

OK

37,128,719

OK

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY
MEDI-CAL ADJUSTMENTS TO COSTS
MH 1961 (08/04)

DEPARTMENT OF MENTAL HEALTH

FISCAL YEAR 2003 - 2004

County: SAN JOAQUIN
County Code: 39

Legal Entity: SAN JOAQUIN COUNTY		A	B	C
Legal Entity Number: 00039		Salaries and Benefits	Other	Total Adjustments
1	Mental Health Medi-Cal Share of Cost Adjustment		(11,594)	(11,594)
2	Depreciation		319,531	319,531
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20	Total Adjustments		307,937	307,937

Crosscheck
307,937 OK

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

OTHER ADJUSTMENTS

MH 1962 (08/04)

FISCAL YEAR 2003 - 2004

County: SAN JOAQUIN

County Code: 39

Legal Entity: SAN JOAQUIN COUNTY		A	B	C
Legal Entity Number: 00039		Salaries and Benefits	Other	Total Adjustments
1	Mental Health Employee Assistance Program		(25,039)	(25,039)
2	Out of County Placements Prior Year		(17,155)	(17,155)
3	Mental Health Capital Projects		214,350	214,350
4	Mental Health Professional Building		(367,847)	(367,847)
5	Mental Health Conditional Release Program		(600,527)	(600,527)
6	Mental Health Activity Center		(1,773,907)	(1,773,907)
7	2002-03 A/P Aging & reconciliation adjustment		(1,441,741)	(1,441,741)
8	2003-04 A/P Aging not on Auditors		964,406	964,406
9	Inpatient Managed Care included in Auditor's		(106,477)	(106,477)
10	Miscellaneous reconciliation items		(240)	(240)
11	Salary & Benefit Adjustment	(241)		(241)
12				
13				
14				
15				
16				
17				
18				
19				
20	Total Adjustments	(241)	(3,154,177)	(3,154,418)

Crosscheck

-3,154,418

OK

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY
 ALLOCATION OF COSTS TO MODES OF SERVICE
 MH 1964 (08/04)

DEPARTMENT OF MENTAL HEALTH
 FISCAL YEAR 2003 - 2004

County: SAN JOAQUIN
 County Code: 39

Legal Entity: SAN JOAQUIN COUNTY		A
Legal Entity Number: 00039		Total Costs
1	Mode Costs (Direct Service and MAA) from MH 1960	30,768,932
	Modes	
2	Hospital Inpatient Services (Mode 05-SFC 10-19)	
3	Other 24 Hour Services (Mode 05-All Other SFC)	6,172,447
4	Day Services (Mode 10)	1,583,887
5	Outpatient Services (Mode 15 Program 1 + Program 2)	18,832,590
6	Outreach Services (Mode 45)	1,084,396
7	Medi-Cal Administrative Activities (Mode 55)	369,662
8	Support Services (Mode 60)	2,725,950
9	Total - Lines 2 through 8	30,768,932

Crosscheck
 OK

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

PAGE 1 OF 1

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL
MH 1966 (08/04)

DETAIL COST REPORT

FISCAL YEAR 2003 - 2004

County: SAN JOAQUIN
County Code: 39

CR

Legal Entity: SAN JOAQUIN COUNTY			A	B	C	D	E	F	G
Legal Entity Number: 00039			Mode Total	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
Mode: 05 - Other 24 Hour Services (All Other SFC)				20					
1	Allocation Percentage		100.00%	100.00%					
2	Total Units			13,221					
3	Gross Cost		6,172,447	6,172,447					
4	Cost per Unit			466.87					
5	SMA per Unit			489.49					
6	Published Charge per Unit								
7	Negotiated Rate / Cost per Unit			466.87					
8	Medi-Cal Units	07/01/03 - 09/30/03							
8A		10/01/03 - 06/30/04							
9	Medicare/Medi-Cal Crossover Units	07/01/03 - 09/30/03							
9A		10/01/03 - 06/30/04							
10	Enhanced SD/MC (Children) Units	07/01/03 - 09/30/03							
10A		10/01/03 - 06/30/04							
10B	Enhanced SD/MC (Refugees) Units	07/01/03 - 06/30/04							
11	Healthy Families (SED) Units	07/01/03 - 09/30/03							
11A		10/01/03 - 06/30/04							
12	Non-Medi-Cal Units			13,221					
13	Medi-Cal Costs	07/01/03 - 09/30/03							
13A		10/01/03 - 06/30/04							
14	Medi-Cal SMA Upper Limits	07/01/03 - 09/30/03							
14A		10/01/03 - 06/30/04							
15	Medi-Cal Published Charges	07/01/03 - 09/30/03							
15A		10/01/03 - 06/30/04							
16	Medi-Cal Negotiated Rates	07/01/03 - 09/30/03							
16A		10/01/03 - 06/30/04							
17	Medicare/Medi-Cal Crossover Costs	07/01/03 - 09/30/03							
17A		10/01/03 - 06/30/04							
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/03 - 09/30/03							
18A		10/01/03 - 06/30/04							
19	Medicare/Medi-Cal Crossover Published Charges	07/01/03 - 09/30/03							
19A		10/01/03 - 06/30/04							
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/03 - 09/30/03							
20A		10/01/03 - 06/30/04							
21	Enhanced SD/MC Costs	07/01/03 - 09/30/03							
21A		10/01/03 - 06/30/04							
22	Enhanced SD/MC SMA Upper Limits	07/01/03 - 09/30/03							
22A		10/01/03 - 06/30/04							
23	Enhanced SD/MC Published Charges	07/01/03 - 09/30/03							
23A		10/01/03 - 06/30/04							
24	Enhanced SD/MC Negotiated Rates	07/01/03 - 09/30/03							
24A		10/01/03 - 06/30/04							
25	Enhanced SD/MC (Refugees) Costs	07/01/03 - 06/30/04							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/03 - 06/30/04							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/03 - 06/30/04							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/03 - 06/30/04							
29	Healthy Families Costs	07/01/03 - 09/30/03							
29A		10/01/03 - 06/30/04							
30	Healthy Families SMA Upper Limits	07/01/03 - 09/30/03							
30A		10/01/03 - 06/30/04							
31	Healthy Families Published Charges	07/01/03 - 09/30/03							
31A		10/01/03 - 06/30/04							
32	Healthy Families Negotiated Rates	07/01/03 - 09/30/03							
32A		10/01/03 - 06/30/04							
33	Non-Medi-Cal Costs		6,172,447	6,172,447					

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL
MH 1966 (08/04)

DETAIL COST REPORT

FISCAL YEAR 2003 - 2004

County: SAN JOAQUIN
County Code: 39

NR

CR

Legal Entity: SAN JOAQUIN COUNTY			A	B	C	D	E	F	G
Legal Entity Number: 00039			Mode Total	Service	Service	Service	Service	Service	Service
Mode: 10 - Day Services				Function	Function	Function	Function	Function	Function
1	Allocation Percentage		100.00%	95	81				
2	Total Units			69.69%	30.31%				
3	Gross Cost		1,583,887	1,103,823	480,064				
4	Cost per Unit			110.37	161.31				
5	SMA per Unit			118.94	130.63				
6	Published Charge per Unit			104.00	152.00				
7	Negotiated Rate / Cost per Unit			90.76	130.63				
8	Medi-Cal Units	07/01/03 - 09/30/03		1,656	718				
8A		10/01/03 - 06/30/04		4,568	1,078				
9	Medicare/Medi-Cal Crossover Units	07/01/03 - 09/30/03							
9A		10/01/03 - 06/30/04							
10	Enhanced SD/MC (Children) Units	07/01/03 - 09/30/03		43					
10A		10/01/03 - 06/30/04		87					
10B	Enhanced SD/MC (Refugees) Units	07/01/03 - 06/30/04							
11		07/01/03 - 09/30/03							
11A	Healthy Families (SED) Units	10/01/03 - 06/30/04		74					
12		Non-Medi-Cal Units		3,573	1,180				
13	Medi-Cal Costs	07/01/03 - 09/30/03	298,597	182,775	115,822				
13A		10/01/03 - 06/30/04	678,070	504,176	173,894				
14	Medi-Cal SMA Upper Limits	07/01/03 - 09/30/03	290,757	196,965	93,792				
14A		10/01/03 - 06/30/04	684,137	543,318	140,819				
15	Medi-Cal Published Charges	07/01/03 - 09/30/03	281,360	172,224	109,136				
15A		10/01/03 - 06/30/04	638,928	475,072	163,856				
16	Medi-Cal Negotiated Rates	07/01/03 - 09/30/03	244,091	150,299	93,792				
16A		10/01/03 - 06/30/04	555,411	414,592	140,819				
17	Medicare/Medi-Cal Crossover Costs	07/01/03 - 09/30/03							
17A		10/01/03 - 06/30/04							
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/03 - 09/30/03							
18A		10/01/03 - 06/30/04							
19	Medicare/Medi-Cal Crossover Published Charges	07/01/03 - 09/30/03							
19A		10/01/03 - 06/30/04							
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/03 - 09/30/03							
20A		10/01/03 - 06/30/04							
21	Enhanced SD/MC Costs	07/01/03 - 09/30/03	4,746	4,746					
21A		10/01/03 - 06/30/04	9,602	9,602					
22	Enhanced SD/MC SMA Upper Limits	07/01/03 - 09/30/03	5,114	5,114					
22A		10/01/03 - 06/30/04	10,348	10,348					
23	Enhanced SD/MC Published Charges	07/01/03 - 09/30/03	4,472	4,472					
23A		10/01/03 - 06/30/04	9,048	9,048					
24	Enhanced SD/MC Negotiated Rates	07/01/03 - 09/30/03	3,903	3,903					
24A		10/01/03 - 06/30/04	7,896	7,896					
25	Enhanced SD/MC (Refugees) Costs								
26	Enhanced SD/MC (Refugees) SMA Upper Limits								
27	Enhanced SD/MC (Refugees) Published Charges								
28	Enhanced SD/MC (Refugees) Negotiated Rates								
29	Healthy Families Costs	07/01/03 - 09/30/03							
29A		10/01/03 - 06/30/04	8,167	8,167					
30	Healthy Families SMA Upper Limits	07/01/03 - 09/30/03							
30A		10/01/03 - 06/30/04	8,802	8,802					
31	Healthy Families Published Charges	07/01/03 - 09/30/03							
31A		10/01/03 - 06/30/04	7,696	7,696					
32	Healthy Families Negotiated Rates	07/01/03 - 09/30/03							
32A		10/01/03 - 06/30/04	6,716	6,716					
33	Non-Medi-Cal Costs		584,704	394,357	190,348				

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL
MH 1966 (08/04)

DETAIL COST REPORT

FISCAL YEAR 2003 - 2004

County: SAN JOAQUIN
County Code: 39

County Code: 39			NR	NR	NR	NR	NR		
Legal Entity: SAN JOAQUIN COUNTY			A	B	C	D	E	F	G
Legal Entity Number: 00039				Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
Mode: 15 - Outpatient (Program 1)			Mode Total	01	10	30	60	70	
1	Allocation Percentage		100.00%	11.29%	5.99%	37.04%	38.74%	6.94%	
2	Total Units			1,172,335	399,689	2,469,314	1,371,215	567,804	
3	Gross Cost		18,364,300	2,073,824	1,100,890	6,801,398	7,114,115	1,274,073	
4	Cost per Unit			1.77	2.75	2.75	5.19	2.24	
5	SMA per Unit			1.83	2.36	2.36	4.37	3.52	
6	Published Charge per Unit			1.93	2.73	2.73	5.07	2.14	
7	Negotiated Rate / Cost per Unit			1.49	2.32	2.32	4.37	1.89	
8			07/01/03 - 09/30/03	152,963	77,428	358,772	228,315	80,666	
8A	Medi-Cal Units		10/01/03 - 06/30/04	424,756	224,045	1,105,996	597,810	229,633	
9			07/01/03 - 09/30/03				16,123		
9A	Medicare/Medi-Cal Crossover Units		10/01/03 - 06/30/04				66,281		
10			07/01/03 - 09/30/03	40	484	994	178		
10A	Enhanced SD/MC (Children) Units		10/01/03 - 06/30/04	768	199	2,040	881	703	
10B	Enhanced SD/MC (Refugees) Units		07/01/03 - 06/30/04						
11			07/01/03 - 09/30/03	1,147	679	1,039	88	234	
11A	Healthy Families (SED) Units		10/01/03 - 06/30/04	1,409	1,840	2,940	1,790	1,753	
12	Non-Medi-Cal Units			591,252	95,014	987,533	459,749	254,815	
13			07/01/03 - 09/30/03	2,865,129	270,587	213,265	1,015,734	1,184,540	181,003
13A	Medi-Cal Costs		10/01/03 - 06/30/04	8,031,614	751,380	617,102	3,046,319	3,101,548	515,264
14			07/01/03 - 09/30/03	2,614,535	279,922	182,730	870,302	997,737	283,944
14A	Medi-Cal SMA Upper Limits		10/01/03 - 06/30/04	7,336,938	777,303	528,746	2,610,151	2,612,430	808,308
15			07/01/03 - 09/30/03	2,843,527	295,219	211,378	1,006,748	1,157,557	172,625
15A	Medi-Cal Published Charges		10/01/03 - 06/30/04	7,973,102	819,779	611,643	3,019,369	3,030,897	491,415
16			07/01/03 - 09/30/03	2,413,294	227,915	179,633	855,551	997,737	152,459
16A	Medi-Cal Negotiated Rates		10/01/03 - 06/30/04	6,765,018	632,886	519,784	2,565,911	2,612,430	434,006
17			07/01/03 - 09/30/03	83,549			83,649		
17A	Medicare/Medi-Cal Crossover Costs		10/01/03 - 06/30/04	343,878			343,878		
18			07/01/03 - 09/30/03	70,458			70,458		
18A	Medicare/Medi-Cal Crossover SMA Upper Limits		10/01/03 - 06/30/04	289,648			289,648		
19			07/01/03 - 09/30/03	81,744			81,744		
19A	Medicare/Medi-Cal Crossover Published Charges		10/01/03 - 06/30/04	336,045			336,045		
20			07/01/03 - 09/30/03	70,458			70,458		
20A	Medicare/Medi-Cal Crossover Negotiated Rates		10/01/03 - 06/30/04	289,648			289,648		
21			07/01/03 - 09/30/03	5,065	71	1,333	2,738	923	
21A	Enhanced SD/MC Costs		10/01/03 - 06/30/04	13,674	1,359	548	5,619	4,571	1,577
22			07/01/03 - 09/30/03	4,339	73	1,142	2,346	778	
22A	Enhanced SD/MC SMA Upper Limits		10/01/03 - 06/30/04	13,014	1,405	470	4,814	3,850	2,475
23			07/01/03 - 09/30/03	5,015	77	1,321	2,714	902	
23A	Enhanced SD/MC Published Charges		10/01/03 - 06/30/04	13,566	1,482	543	5,569	4,467	1,504
24			07/01/03 - 09/30/03	4,266	60	1,123	2,306	778	
24A	Enhanced SD/MC Negotiated Rates		10/01/03 - 06/30/04	11,517	1,144	462	4,733	3,850	1,329
25			07/01/03 - 06/30/04						
26	Enhanced SD/MC (Refugees) Costs		07/01/03 - 06/30/04						
27	Enhanced SD/MC (Refugees) SMA Upper Limits		07/01/03 - 06/30/04						
28	Enhanced SD/MC (Refugees) Published Charges		07/01/03 - 06/30/04						
28	Enhanced SD/MC (Refugees) Negotiated Rates		07/01/03 - 06/30/04						
29			07/01/03 - 09/30/03	7,743	2,029	1,870	2,862	457	525
29A	Healthy Families Costs		10/01/03 - 06/30/04	28,879	2,492	5,068	8,098	9,287	3,933
30			07/01/03 - 09/30/03	7,362	2,099	1,602	2,452	385	824
30A	Healthy Families SMA Upper Limits		10/01/03 - 06/30/04	27,852	2,578	4,342	6,938	7,822	6,171
31			07/01/03 - 09/30/03	7,851	2,214	1,854	2,836	446	501
31A	Healthy Families Published Charges		10/01/03 - 06/30/04	28,595	2,719	5,023	8,026	9,075	3,751
32			07/01/03 - 09/30/03	6,522	1,709	1,575	2,410	385	442
32A	Healthy Families Negotiated Rates		10/01/03 - 06/30/04	24,324	2,099	4,269	6,821	7,822	3,313
33				6,984,670	1,045,906	261,703	2,720,029	2,385,262	571,769
33	Non-Medi-Cal Costs								

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

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ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL
MH 1966 (08/04)

DETAIL COST REPORT

FISCAL YEAR 2003 - 2004

County: SAN JOAQUIN
County Code: 39

Legal Entity: SAN JOAQUIN COUNTY			MHS	MHS	MHS	MHS	MHS	M	N
Legal Entity Number: 00039			H	I	J	K	L		
Mode: 15 - Outpatient (Program 2)			Service Function	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
			30	10	30	10	30		
1	Allocation Percentage		0.60%	17.32%	16.97%	24.05%	26.77%		
2	Total Units		1,140	32,850	32,175	45,600	50,760		
3	Gross Cost		2,815	81,117	79,451	112,601	125,343		
4	Cost per Unit		2.47	2.47	2.47	2.47	2.47		
5	SMA per Unit		2.36	2.36	2.36	2.36	2.36		
6	Published Charge per Unit								
7	Negotiated Rate / Cost per Unit								
8	Medi-Cal Units	07/01/03 - 09/30/03	960	7,620	6,975	7,920	10,320		
8A		10/01/03 - 06/30/04	180	23,670	24,480	34,140	38,460		
9	Medicare/Medi-Cal Crossover Units	07/01/03 - 09/30/03							
9A		10/01/03 - 06/30/04							
10	Enhanced SD/MC Units	07/01/03 - 09/30/03							
10A		10/01/03 - 06/30/04				600	300		
10B	Enhanced SD/MC (Refugees) Units	07/01/03 - 06/30/04							
11	Healthy Families (SED) Units	07/01/03 - 09/30/03							
11A		10/01/03 - 06/30/04							
12	Non-Medi-Cal Units			1,560	720	2,940	1,680		
13	Medi-Cal Costs	07/01/03 - 09/30/03	2,371	18,816	17,224	19,557	25,483		
13A		10/01/03 - 06/30/04	444	58,449	60,449	84,303	94,970		
14	Medi-Cal SMA Upper Limits	07/01/03 - 09/30/03	2,266	17,983	16,461	18,691	24,355		
14A		10/01/03 - 06/30/04	425	55,861	57,773	80,570	90,766		
15	Medi-Cal Published Charges	07/01/03 - 09/30/03							
15A		10/01/03 - 06/30/04							
16	Medi-Cal Negotiated Rates	07/01/03 - 09/30/03							
16A		10/01/03 - 06/30/04							
17	Medicare/Medi-Cal Crossover Costs	07/01/03 - 09/30/03							
17A		10/01/03 - 06/30/04							
18	Medicare/Medi-Cal Crossover SMA Upper Limits	07/01/03 - 09/30/03							
18A		10/01/03 - 06/30/04							
19	Medicare/Medi-Cal Crossover Published Charges	07/01/03 - 09/30/03							
19A		10/01/03 - 06/30/04							
20	Medicare/Medi-Cal Crossover Negotiated Rates	07/01/03 - 09/30/03							
20A		10/01/03 - 06/30/04							
21	Enhanced SD/MC Costs	07/01/03 - 09/30/03							
21A		10/01/03 - 06/30/04				1,482	741		
22	Enhanced SD/MC SMA Upper Limits	07/01/03 - 09/30/03							
22A		10/01/03 - 06/30/04				1,416	708		
23	Enhanced SD/MC Published Charges	07/01/03 - 09/30/03							
23A		10/01/03 - 06/30/04							
24	Enhanced SD/MC Negotiated Rates	07/01/03 - 09/30/03							
24A		10/01/03 - 06/30/04							
25	Enhanced SD/MC (Refugees) Costs	07/01/03 - 06/30/04							
26	Enhanced SD/MC (Refugees) SMA Upper Limits	07/01/03 - 06/30/04							
27	Enhanced SD/MC (Refugees) Published Charges	07/01/03 - 06/30/04							
28	Enhanced SD/MC (Refugees) Negotiated Rates	07/01/03 - 06/30/04							
29	Healthy Families Costs	07/01/03 - 09/30/03							
29A		10/01/03 - 06/30/04							
30	Healthy Families SMA Upper Limits	07/01/03 - 09/30/03							
30A		10/01/03 - 06/30/04							
31	Healthy Families Published Charges	07/01/03 - 09/30/03							
31A		10/01/03 - 06/30/04							
32	Healthy Families Negotiated Rates	07/01/03 - 09/30/03							
32A		10/01/03 - 06/30/04							
33	Non-Medi-Cal Costs		0	3,852	1,778	7,260	4,148		

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH

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ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL

DETAIL COST REPORT

FISCAL YEAR 2003 - 2004

County: SAN JOAQUIN
County Code: 39

		A	CR	CR	CR			
Legal Entity: SAN JOAQUIN COUNTY								
Legal Entity Number: 00039								
Mode: 45 - Outreach		Mode Total						
			Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
			10	11	20			
1	Allocation Percentage	100.00%	57.06%	39.54%	3.40%			
2	Total Units		41,788	1	1,618			
3	Gross Cost	1,084,396	618,793	428,739	36,864			
4	Cost per Unit		14.81	428,739.00	22.78			
5	Non-Medi-Cal Units		41,788	1	1,618			
6	Non-Medi-Cal Costs	1,084,396	618,793	428,739	36,864			

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH
PAGE 1 OF 1ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL
MH 1966 (08/04)

DETAIL COST REPORT

FISCAL YEAR 2003 - 2004

County: SAN JOAQUIN
County Code: 39

Legal Entity: SAN JOAQUIN COUNTY		MAA		MAA			
Legal Entity Number: 00039		A	B	C	D	E	G
Mode: 55 - Medi-Cal Administrative Activities		Mode Total	Service Function	Service Function	Service Function	Service Function	Service Function
			17	21			
1	Allocation Percentage	100.00%	71.42%	28.58%			
2	Total Units		84,165	210,106			
3	Total Expenditures	369,662	264,016	105,646			
4	Cost per Unit		3.14	0.50			
5	Non-Medi-Cal Costs	116,480					

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DEPARTMENT OF MENTAL HEALTH
PAGE 1 OF 1

ALLOCATION OF COSTS TO SERVICE FUNCTIONS - MODE TOTAL
MH 1966 (08/04)

DETAIL COST REPORT

FISCAL YEAR 2003 - 2004

County: SAN JOAQUIN
County Code: 39

CR

Legal Entity: SAN JOAQUIN COUNTY		A	B	C	D	E	F	G
Legal Entity Number: 00039		Mode Total	Service Function	Service Function	Service Function	Service Function	Service Function	Service Function
Mode: 60 - Support			30					
1	Allocation Percentage		100.00%	100.00%				
2	Total Units		311,456					
3	Gross Cost	2,725,950	2,725,950					
4	Cost per Unit		8.75					
5	Non-Medi-Cal Units (Same as Line 2)		311,456					
6	Non-Medi-Cal Costs (Same as Line 3)	2,725,950	2,725,950					

DETERMINATION OF SD/MC DIRECT SERVICE AND MAA REIMBURSEMENT
MH 1968 (08/04)

FISCAL YEAR 2003 - 2004

County: SAN JOAQUIN County Code: 35 Legal Entity: SAN JOAQUIN COUNTY Legal Entity Number: 00039			REIMBURSEMENT TYPE				PC	NR				Costs	
			A	B	C	D	E	F	G	H	I	J	K
			Mode 55 S F's 01-09 31-39 S F's 21-29			Total MAA	Total Inpatient Mode 05- Hospital	Mode 05-All Other	Mode 10	Mode 15 Program (1)	Total Outpatient Exclude Program (2)	Mode 15 Program (2)	Total Outpatient (Col J + Col K)
1	Medi-Cal Costs	07/01/03 - 09/30/03											
1A		10/01/03 - 06/30/04											
2	Medi-Cal SMA	07/01/03 - 09/30/03											
2A		10/01/03 - 06/30/04											
3	Medi-Cal P C	07/01/03 - 09/30/03											
3A		10/01/03 - 06/30/04											
4	Medi-Cal N R	07/01/03 - 09/30/03											
4A		10/01/03 - 06/30/04											
5	Medi-Cal Gross Reimbursement	07/01/03 - 09/30/03											
5A		10/01/03 - 06/30/04											
6	Medicare/Medi-Cal Crossover Cost	07/01/03 - 09/30/03											
6A		10/01/03 - 06/30/04											
7	Medicare/Medi-Cal Crossover SMA	07/01/03 - 09/30/03											
7A		10/01/03 - 06/30/04											
8	Medicare/Medi-Cal Crossover P C	07/01/03 - 09/30/03											
8A		10/01/03 - 06/30/04											
9	Medicare/Medi-Cal Crossover N R	07/01/03 - 09/30/03											
9A		10/01/03 - 06/30/04											
10	Medicare/Medi-Cal Crossover Gross Reim	07/01/03 - 09/30/03											
10A		10/01/03 - 06/30/04											
11	Total SD/MC + Crossover Gross Reim	07/01/03 - 09/30/03											
11A		10/01/03 - 06/30/04											
12	Enhanced SD/MC (Children) Cost	07/01/03 - 09/30/03											
12A		10/01/03 - 06/30/04											
13	Enhanced SD/MC (Children) SMA	07/01/03 - 09/30/03											
13A		10/01/03 - 06/30/04											
14	Enhanced SD/MC (Children) P C	07/01/03 - 09/30/03											
14A		10/01/03 - 06/30/04											
15	Enhanced SD/MC (Children) N R	07/01/03 - 09/30/03											
15A		10/01/03 - 06/30/04											
16	Enhanced SD/MC (Children) Gross Reim	07/01/03 - 09/30/03											
16A		10/01/03 - 06/30/04											
17	Enhanced SD/MC (Refugees) Cost	07/01/03 - 06/30/04											
18	Enhanced SD/MC (Refugees) SMA	07/01/03 - 06/30/04											
19	Enhanced SD/MC (Refugees) P C	07/01/03 - 06/30/04											
20	Enhanced SD/MC (Refugees) N R	07/01/03 - 06/30/04											
21	Total Medi-Cal Gross Reimbursement	07/01/03 - 09/30/03											
21A	(Excludes Refugees)	10/01/03 - 06/30/04											
22	Enhanced SD/MC (Refugees) Gross Reim	07/01/03 - 06/30/04											
23	Healthy Families Cost	07/01/03 - 09/30/03											
23A		10/01/03 - 06/30/04											
24	Healthy Families SMA	07/01/03 - 09/30/03											
24A		10/01/03 - 06/30/04											
25	Healthy Families P C	07/01/03 - 09/30/03											
25A		10/01/03 - 06/30/04											
26	Healthy Families N R	07/01/03 - 09/30/03											
26A		10/01/03 - 06/30/04											
27	Healthy Families Gross Reim	07/01/03 - 09/30/03											
27A		10/01/03 - 06/30/04											
28	Less Patient and Other Payor Revenue												
28A	SD/MC + Crossover Revenue	07/01/03 - 09/30/03											
28A		10/01/03 - 06/30/04											
29	Enhanced SD/MC (Children) Revenue												
30	Enhanced SD/MC (Refugees) Revenue												
31	Healthy Families Revenue												
32	Total Expenditures from MAA (Mode 55)												
33	Medi-Cal Eligibility Factor (Average)												
34	Revenue - MAA												
35	Net Due - SD/MC for Direct Services	07/01/03 - 09/30/03											
35A		10/01/03 - 06/30/04											
36	Net Due - Enhanced SD/MC (Refugees)												
37	Net Due - Healthy Families	07/01/03 - 09/30/03											
37A		10/01/03 - 06/30/04											
	Amount Negotiated Rates Exceed Costs												
38	SD/MC (Includes Children)	07/01/03 - 09/30/03											
38A		10/01/03 - 06/30/04											
39	Enhanced SD/MC (Refugees)												
40	Healthy Families	07/01/03 - 09/30/03											
40A		10/01/03 - 06/30/04											

CALIFORNIA HEALTH AND HUMAN SERVICES AGENCY

DETAIL COST REPORT

DEPARTMENT OF MENTAL HEALTH

SD/MC PRELIMINARY DESK SETTLEMENT
MH 1579 (08/04)

FISCAL YEAR 2003 - 2004

County SAN JOAQUIN
County Code 39

Legal Entity SAN JOAQUIN COUNTY		A	B	C	D	E	F	G	H	I	J
Legal Entity Number 00039		Total MAA	Total Inpatient	Total Outpatient	Total	50 00% FFP	54 35% FFP	52 95% FFP	Variable % FFP	75 00% FFP	Total FFP
SD/MC Administrative Reimbursement (County Only)											
1	County SD/MC Direct Service Gross Reimbursement			10,813,249	10,813,249						
2	Contract Providers Medi-Cal Direct Service Gross Reimbursement		1,072,030	6,605,968	7,677,998						
3	Total Medi-Cal Direct Service Gross Reimbursement				18,491,247						
4	Medi-Cal Administrative Reimbursement Limit				2,773,687						
5	Medi-Cal Administration				4,112,360						
6	Medi-Cal Administrative Reimbursement				2,773,687	1,386,844					1,386,844
Healthy Families Administrative Reimbursement (County Only)											
7	County Healthy Families Direct Service Gross Reimbursement			37,562	37,562						
7A	Contract Providers Healthy Families Direct Service Gross Reimbursement			57,228	57,228						
7B	Total Healthy Families Direct Service Gross Reimbursement				94,790						
8	Healthy Families Administrative Reimbursement Limit				9,479						
9	Healthy Families Administration				14,440						
10	Healthy Families Administrative Reimbursement				9,479				6,161		6,161
SD/MC Net Reimbursement for MAA											
11	Medi-Cal Admin. Activities Svc Functions 01 - 09										
12	Medi-Cal Admin. Activities Svc Functions 11 - 19, 31 - 39	180,825			180,825	90,412					90,412
13	Medi-Cal Admin. Activities Svc Functions 21 - 29 (County Only)	72,357			72,357					54,268	54,268
14	Utilization Review-Skilled Prof. Med. Personnel (County Only)				148,547					111,410	111,410
15	Other SD/MC Utilization Review (County Only)				78,195	39,098					39,098
16	SD/MC Net Reimbursement for Direct Services			2,814,321	2,814,321		1,529,584				1,529,584
16A	Enhanced SD/MC Net Reimb. (Children)			7,960,339	7,960,339			4,215,000			4,215,000
17	Enhanced SD/MC Net Reimb. (Refugees)			8,169	8,169				5,310		5,310
17A	Enhanced SD/MC Net Reimb. (Refugees)			21,636	21,636				14,063		14,063
18	Enhanced SD/MC Net Reimb. (Refugees)										
19	Total SD/MC Reimbursement Before Excess FFP										7,445,988
20	Amount Negotiated Rates Exceed Costs - SD/MC & Enh. SD/MC										
21	Total SD/MC Reimbursement (FFP)										7,445,988
22	Contract Limitation Adjustment										
23	Adjusted Total SD/MC Reimbursement (FFP)										7,445,988
24	Healthy Families Net Reimbursement			6,328	6,328				4,113		4,113
24A	Healthy Families Net Reimbursement			31,041	31,041				20,176		20,176
25	Total Healthy Families Reimbursement Before Excess FFP										30,451
26	Amount Negotiated Rates Exceed Costs - Healthy Families										
27	Total Healthy Families Reimbursement										30,451

STATE SHARE OF SD/MC COST

Line 6: Column D minus Column E	1,386,844
Line 10: Column D minus Column H	3,318
Line 11: Column D minus Column E	
Line 12: Column D minus Column E	90,412
Line 13: Column D minus Column I	18,089
Line 14: Column D minus Column I	37,137
Line 15: Column D minus Column E	39,098
Line 16: Column D minus Column F	1,284,738
Line 16A: Column D minus Column G	3,745,340
Line 17: Column D minus Column H	2,859
Line 17A: Column D minus Column H	7,573
Line 18: Column D minus Column H	
Line 24: Column D minus Column H	2,215
Line 24A: Column D minus Column H	10,864
TOTAL STATE SHARE SD/MC COST	6,628,485